



ROSS MILLER
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Certificate of Business Trust

(PURSUANT TO NRS CHAPTER 88A)

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Name of Business Trust: (must include the words Business Trust, B.T., or BT)				
2. Registered Agent for Service of Process: (check only one box)	<input type="checkbox"/> Commercial Registered Agent: <input type="text"/> Name <input type="checkbox"/> Noncommercial Registered Agent (name and address below) OR <input type="checkbox"/> Office or Position with Entity (name and address below) <input type="text"/> Name of Noncommercial Registered Agent OR Name of Title of Office or Other Position with Entity <input type="text"/> Street Address <input type="text"/> City <input type="text"/> Nevada <input type="text"/> Zip Code <input type="text"/> Mailing Address (if different from street address) <input type="text"/> City <input type="text"/> Nevada <input type="text"/> Zip Code			
3. Names and Addresses of Trustees: (must include the name and post office box or street address, either residence or business, of at least one trustee; attach an additional page if listing more than 3)	1) <input type="text"/> Name <input type="text"/> Address <input type="text"/> City <input type="text"/> State <input type="text"/> Zip Code 2) <input type="text"/> Name <input type="text"/> Address <input type="text"/> City <input type="text"/> State <input type="text"/> Zip Code 3) <input type="text"/> Name <input type="text"/> Address <input type="text"/> City <input type="text"/> State <input type="text"/> Zip Code			
4. Name, Address and Signature of Each Person Forming the Business Trust: (must be signed by each person forming the business trust; attach an additional page if more than 2)	<input type="text"/> Name <input type="text"/> Address <input type="text"/> City <input type="text"/> State <input type="text"/> Zip Code X Signature <input type="text"/> Name <input type="text"/> Address <input type="text"/> City <input type="text"/> State <input type="text"/> Zip Code X Signature <input type="text"/> Name <input type="text"/> Address <input type="text"/> City <input type="text"/> State <input type="text"/> Zip Code			
5. Certificate of Acceptance of Appointment of Registered Agent:	<i>I hereby accept appointment as Registered Agent for the above named Entity.</i> X Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity <input type="text"/> Date <input type="text"/>			